



BK 0468 PG 0667

STATE MS.-DESO TO CO.
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HEIRSHIP AFFIDAVIT

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W.E. DAVIS CH. CLK.(Heirship of CULLEY RIKARD Deceased)STATE OF Mississippi
COUNTY OF DesotoThomas J. Lewis, of lawful age,
being first duly sworn, upon his oath deposes and says:That he was personally well acquainted with the above decedent, during his lifetime, having known him for 40
years, and that affiant bears the following relationship to the said decedent, to wit: step sonAffiant further states that the said decedent departed this life at Pop East Hosp. in Shelby County,
State of Tennessee, on or about Feb. 25, 2000, being 85 years old at
the date of his death.Affiant further states that he was well acquainted with the family and near relatives of the said decedent, and with all
those who would under the laws of the State of Mississippi, be his heirs, and that the following statements
and the answers to the following named questions are based upon the personal knowledge of affiant and are true and correct:QUESTION 1 - Did the decedent leave a will? ANSWER: NoQUESTION 2 - If so, has the will been admitted to probate - at what place, and when? ANSWER: NAQUESTION 3 - Has an administrator been appointed for the estate of said deceased? ANSWER: NOQUESTION 4 - If so, give the County in which the said administration proceedings are pending, and the name and address
of the administrator. ANSWER: NAQUESTION 5 - Did the decedent receive the benefit of any Medicaid payments? ANSWER: Yes _____ No ✓
If yes, attach copy of Division of Medicaid Waiver of Recovery pursuant to Section 43-13-317.QUESTION 6 - Give the name and address of the surviving widow or widower of decedent. ANSWER: Anne
R. RikardIf not living, state date of death NAQUESTION 7 - If the decedent was married more than once, give the name of the former husband or wife, and state whether
said former spouse is dead or divorced.ANSWER: Elizabeth B. Rikard (deceased)QUESTION 8 - On the blank lines below, give the names and places of residence of all surviving children of deceased,
together with the other information called for: ANSWER: (Give names of surviving children only)

NAME OF CHILD	DATE OF BIRTH	IF NOT LIVING DATE OF DEATH	NAME OF HUSBAND OR WIFE	ADDRESS OR IF NOT LIVING DATE OF DEATH
1. <u>Gerald C. Rikard</u>	<u>4-10-43</u>		<u>Carolyn</u>	<u>72 Vaughn Lane</u> Olive Branch, MS 38654
2. <u>Betty R. Olds</u>	<u>11-29-56</u>		<u>David</u>	<u>60 Vaughn Lane</u>
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

QUESTION 9 - Give below the names of any deceased children of the decedent, together with the other information called
for: ANSWER:

NAME OF CHILD	DATE OF BIRTH	DATE OF DEATH	SURVIVING HUSBAND OR WIFE	IF NOT LIVING DATE OF DEATH
1. <u>None</u>	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

QUESTION 10 - Give the names of the children of any deceased son or daughter of the decedent: ANSWER:

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NAME OF CHILD	DATE OF BIRTH	ADDRESS OR IF NOT LIVING, DATE OF DEATH	NAME OF FATHER AND MOTHER
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

QUESTION 11 - Did the decedent have any adopted children, or step-children taken into his home?

ANSWER: Yes ☒ No ____ IF SO, WRITE THEIR NAMES, AGES, AND ADDRESSES IN THE
BLANK LINES BELOW:

step
children
Never
adopted

NAME	AGE	ADDRESS	
1. <u>Thomas J. Lewis</u>	<u>52</u>	<u>864 Mahone Rd. S.</u>	<u>Hernando, Ms. 38632</u>
2. <u>Virginia A. Lewis</u>	<u>51</u>	<u>4108 Ridge Rd.</u>	<u>Smyrna Ga. 30080</u>
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

QUESTION 12 - Did the decedent leave any unpaid debts; and if so, give as nearly as possible, the amount of such debts, and whether they have since been paid.

ANSWER: No

QUESTION 13 - If the decedent left no children, then give below the names and addresses (together with other information called for), of his surviving father, mother, brothers and sisters: ANSWER:

NAME	RELATIONSHIP	AGE	ADDRESS OR IF NOT LIVING DATE OF DEATH
1. <u>NA</u>	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

QUESTION 14 - If the deceased left no children nor children of a deceased child, then give below the names of any deceased brothers and sisters of the decedent, together with the other information called for: ANSWER:

NAME OF BROTHER/SISTER	DATE OF BIRTH	DATE OF DEATH	SURVIVING CHILDREN	IF NOT LIVING DATE OF DEATH
1. <u>NA</u>	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Thomas J. Lewis
Signature of Affiant

Subscribed and sworn to before me this 30th day of March, 192004

My commission expires:

June 17, 2007

Cornelia Rhea Wall
Notary Public

CORROBORATION AFFIDAVIT

STATE OF _____ (To be signed by some person other than the one making the foregoing affidavit.)
COUNTY OF _____

Ruby E. Lewis, of lawful
age, being first duly sworn, upon his oath states: That the information given in the above and foregoing affidavit, made by
Thomas J. Lewis is true, to the personal knowledge of this affiant.

Ruby E. Lewis
Signature of Corroborating Affiant

Subscribed and sworn to before me this 30th day of March, 192004

My commission expires:

June 17, 2007

Cornelia Rhea Wall
Notary Public